



WHAT DO THESE RESULTS MEAN FOR INDIVIDUALS WITH NON-SMALL CELL LUNG CANCER (NSCLC)?

Patients with epidermal growth factor receptor (EGFR)-mutant NSCLC who receive treatment with amivantamab via intravenous (IV) infusion can switch safely to receiving amivantamab via a subcutaneous (SC) injection. This method is more convenient, preferred by patients, and has fewer side effects related to treatment administration compared with historical data for IV infusion



WHAT WAS THE PURPOSE OF THIS STUDY?

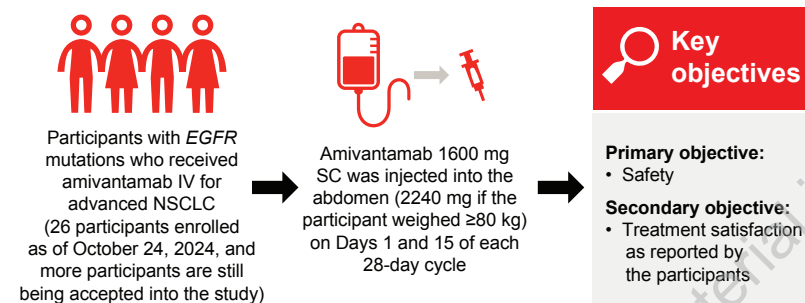
- In this study, researchers aimed to find out if switching the method of administration of amivantamab from IV infusion to SC injection in participants with EGFR-mutant NSCLC would impact the overall safety of the treatment. They also gathered feedback from participants to understand how convenient and satisfying the new method of administration was



WHO WAS IN THE STUDY AND HOW WAS IT CARRIED OUT?

- PALOMA-2 (NCT05498428) is a phase 2 clinical trial that is evaluating amivantamab in various groups of participants with EGFR-mutant NSCLC
- Cohort 4 of this study enrolled participants with EGFR-mutant NSCLC who received amivantamab through IV infusion and switched to amivantamab via SC injection. The researchers observed how the participants responded to SC injection and collected the participants' opinions about this new method using a questionnaire
- Researchers also conducted pharmacokinetic (PK) simulations to predict serum concentrations of amivantamab when it was given through an IV infusion compared with an SC injection at different dose levels

Figure 1: PALOMA-2 cohort 4 study design



EGFR, epidermal growth factor receptor; IV, intravenous; NSCLC, non-small cell lung cancer; SC, subcutaneous.

Subcutaneous After Intravenous Amivantamab in Advanced NSCLC: Initial Results From PALOMA-2

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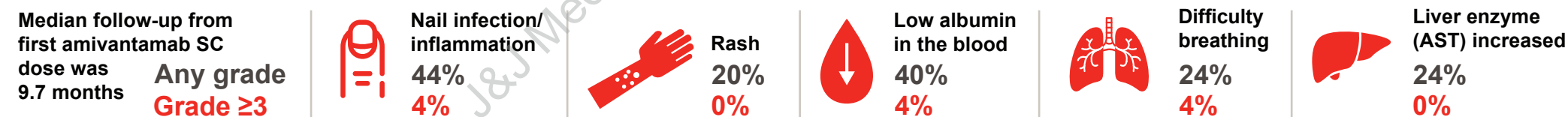


WHAT WERE THE RESULTS?

Participants experienced fewer side effects related to treatment administration after switching to SC injection compared with historical data for IV infusion, with no new safety concerns observed because of switching

PK simulations showed that comparable serum concentrations of amivantamab were achieved regardless of how it was administered or the dose level

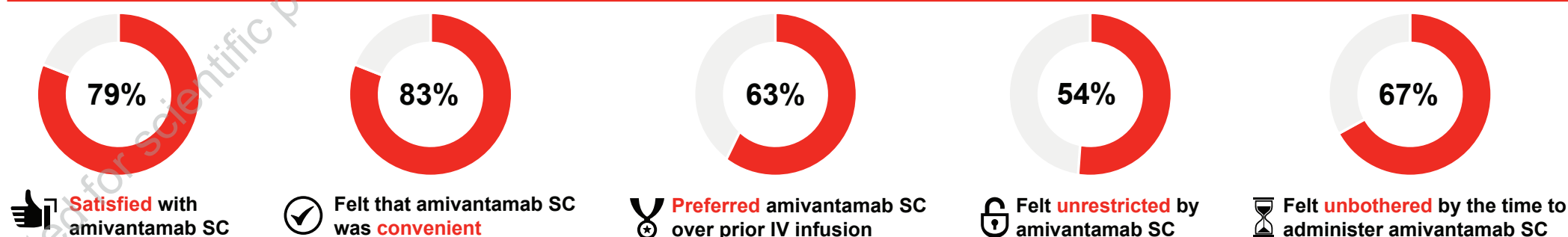
Figure 2: Common side effects that appeared or worsened after the start of amivantamab SC



No administration-related reactions were observed with amivantamab SC^a

^aParticipants had received at least 8 weeks of amivantamab IV before switching; administration-related reactions may have been observed with IV infusion. AST, aspartate aminotransferase; SC, subcutaneous.

Figure 3: Participant feedback on administering amivantamab via SC injection at Cycle 1 of treatment



IV, intravenous; SC, subcutaneous.

Glossary of terms

EGFR mutation	EGFR is a protein that relays the chemical signals that tell the cell to grow, divide, or survive. Mutations in the EGFR gene are common in NSCLC and can affect how the cancer responds to treatment	SC	Injected underneath the skin	Serum concentration	The amount of a substance in a person's blood	Side effects related to treatment administration	These can include pain or redness at the injection or infusion site, swelling, or bruising
AST	A protein that helps process amino acids; high levels can indicate liver damage	IV	Infused into the vein	PK	The study of how the body affects the drug or the description of the drug's absorption, distribution, metabolism, and excretion	Albumin	A protein in the blood that helps maintain fluid balance and transport substances



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